

**Report incidences of the following infections, diseases, or conditions to the
Indiana State Department of Health (ISDH)**

Telephone: 317.233.7125 or Facsimile: 317.234.2812

Section II. Medical Laboratory Reporting

Effective December 12, 2008

410 IAC 1-2.3-48

Report laboratory findings demonstrating evidence of the following infections, diseases, or conditions at least weekly.

Arboviruses, including, but not limited to: California encephalitis; Dengue or dengue hemorrhagic fever; Eastern equine encephalitis (EEE); Japanese B encephalitis; Powassan encephalitis; St. Louis encephalitis (SLE); West Nile encephalitis; Western equine encephalitis (WEE); or Yellow fever <i>Babesia</i> species <i>Bacillus anthracis</i> <i>Bordetella pertussis</i> <i>Borrelia burgdorferi</i> <i>Brucella</i> species <i>Calymatobacterium granulomatis</i> <i>Campylobacter</i> species <i>Chlamydia psittaci</i> <i>Chlamydia trachomatis</i> <i>Clostridium botulinum</i> <i>Clostridium tetani</i> <i>Corynebacterium diphtheriae</i> <i>Coxiella burnetii</i> <i>Cryptococcus neoformans</i> <i>Cryptosporidium parvum</i> <i>Cyclospora cayetanensis</i> <i>Ehrlichia chaffeensis</i> <i>Ehrlichia phagocytophila</i>	<i>Escherichia coli</i> , diarrhea producing and other enterohemorrhagic types, including, but not limited to: <i>E. coli</i> O157; <i>E. coli</i> O157:H7; Shiga-toxin producing; or Sorbitol-negative <i>Francisella tularensis</i> <i>Giardia lamblia</i> <i>Haemophilus ducreyi</i> <i>Haemophilus influenzae</i> , invasive disease Hantavirus Hepatitis viruses: Anti-HAV IgM; HBsAg, HBeAg, or IgM anti-HBc; RIBA, RNA, or anti-HCV (or any combination); Delta; or Anti-HEV IgM or IgG Herpes simplex virus (neonatal) <i>Histoplasmosis capsulatum</i> HIV and related retroviruses Influenza Kaposi's sarcoma (biopses) <i>Legionella</i> species <i>Leptospira</i> species <i>Listeria monocytogenes</i> Measles virus Mumps virus <i>Mycobacterium tuberculosis</i> <i>Neisseria gonorrhoeae</i>	<i>Neisseria meningitidis</i> , invasive disease <i>Nocardia</i> species and antimicrobial resistance pattern <i>Plasmodium</i> species <i>Pneumocystis carinii</i> Poliomyelitis Rabies virus (animal or human) <i>Rickettsia</i> species Rubella virus <i>Salmonella</i> species <i>Shigella</i> species and antimicrobial resistance pattern Smallpox <i>Staphylococcus aureus</i> , vancomycin resistance level of MIC \geq 8 μ g/mL <i>Streptococcus pneumoniae</i> , invasive disease, and antimicrobial resistance pattern <i>Streptococcus</i> Group A (e.g. <i>Streptococcus pyogenes</i>), invasive disease <i>Streptococcus</i> Group B, (e.g. <i>Streptococcus agalactiae</i>), invasive disease <i>Treponema pallidum</i> <i>Trichinella spiralis</i> <i>Vibrio</i> species <i>Yersinia</i> species, including: <i>pestis</i> ; <i>enterocolitica</i> ; or <i>pseudotuberculosis</i>
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Reporting is required of any specimen derived from the human body that yields microscopic, bacteriologic, immunologic, serologic, or other evidence of infection by any of the organisms or agents listed.

Reporting shall include the following epidemiological and testing data:

1. Name, date, results of test performed, the laboratory's normal limits for the test, the laboratory's interpretation of the test results, and the laboratory's accession number or other numeric identifier
2. Name, address, and date of birth or age, if date of birth is not available, of the person from whom the specimen was obtained
3. Name, address, and telephone number of attending physician, hospital, clinic, or other specimen submitter
4. Name, address, telephone number, and CLIA ID number of the laboratory performing the test

Laboratories shall submit all isolates of the following organisms to the ISDH Laboratory for further evaluation within five (5) business days of isolation:

1. *Haemophilus influenzae*, invasive disease
2. *Neisseria meningitidis*, invasive disease
3. *Escherichia coli* O157:H7; shiga-toxin producing; or sorbitol-negative *E. coli* isolates
4. *Staphylococcus aureus*, vancomycin resistance level of MIC \geq 8 μ g/mL
5. *Mycobacterium tuberculosis*
6. *Streptococcus pneumoniae*, invasive disease, isolates from persons less than five (5) years of age
7. *Nocardia*
8. *Listeria monocytogenes*
9. *Salmonella* isolates from stool, urine, blood, or other sterile sites

**Report incidences of the following infections, diseases, or conditions to the
Local Health Department – Phone Number: _____**

**Section I. Reportable Communicable Diseases and Conditions for Health Care Providers and Hospitals
Effective December 12, 2008**

410 IAC 1-2.3-47

Report items in BOLD immediately. Report items with an asterisk (*) within 24 hours. Report all others within 72 hours.

Acquired immunodeficiency syndrome (AIDS)	Hepatitis, viral, Type A	Shigellosis
*Animal bites	Hepatitis, viral, Type B	Smallpox (variola infection)
Anthrax	Hepatitis, viral, Type B, pregnant woman (acute and chronic) or perinatally exposed infant	<i>Adverse events or complications due to smallpox vaccination (vaccinia virus infection) or secondary transmission to others after vaccination. This includes accidental implantation at sites other than the vaccination site, secondary bacterial infections at the vaccination site, vaccinia keratitis, eczema vaccinatum, generalized vaccinia, congenital vaccinia, progressive vaccinia, vaccinia encephalitis, death due to vaccinia complications, and other complications requiring significant medical intervention.</i>
Babesiosis	Hepatitis, viral, Type C (acute), within five (5) business days	Staphylococcus aureus, vancomycin resistance level of MIC \geq 8 μg/mL or severe <i>Staphylococcus aureus</i> in a previously healthy person
Botulism	Hepatitis, viral, Type Delta	<i>Streptococcus pneumoniae</i> , invasive disease and antimicrobial resistance pattern
Brucellosis	Hepatitis, viral, Type E	<i>Streptococcus</i> , Group A, invasive disease
Campylobacteriosis	Hepatitis, viral, unspecified	<i>Streptococcus</i> , Group B, invasive disease
Chancroid	Histoplasmosis	Syphilis
<i>Chlamydia trachomatis</i> , genital infection	HIV infection/disease	Tetanus
Cholera	HIV infection/disease, pregnant woman or perinatally exposed infant	Toxic shock syndrome (streptococcal or staphylococcal)
Cryptosporidiosis	Influenza-associated death (all ages)	Trichinosis
<i>Cyclospora</i>	Legionellosis	Tuberculosis, cases and suspects
Diphtheria	Leptospirosis	Tularemia
Ehrlichiosis	Listeriosis	Typhoid fever, cases and carriers
Encephalitis, arboviral, including:	Lyme disease	Typhus, endemic (flea-borne)
California encephalitis;	Lymphogranuloma venereum	Varicella (chicken pox)
Dengue or dengue hemorrhagic fever;	Malaria	Vibriosis (non-cholera)
Eastern equine encephalitis (EEE);	Measles (rubeola)	Yellow fever
Powassan encephalitis;	Meningococcal disease, invasive	Yersiniosis
St. Louis encephalitis (SLE);	Mumps	
West Nile encephalitis; or	Neonatal herpes	
Western equine encephalitis (WEE)	Pertussis	
<i>Escherichia coli</i>, diarrhea producing and other enterohemorrhagic types, including, but not limited to:	Plague	
<i>E. coli</i> O157;	Poliomyelitis	
<i>E. coli</i> O157:H7;	Psittacosis	
Shiga-toxin producing; or	Q Fever	
Sorbitol-negative	Rabies in humans or animals	
Giardiasis	<i>Confirmed and suspect animal with human exposure</i>	
Gonorrhea	Rabies, postexposure treatment	
Granuloma inguinale	Rocky Mountain spotted fever	
<i>Haemophilus influenzae</i>, invasive disease	Rubella (German measles)	
Hansen's disease (leprosy)	Rubella congenital syndrome	
Hantavirus pulmonary syndrome	Salmonellosis, non-typhoidal	
Hemolytic uremic syndrome, postdiarrheal		

Other Reportable Conditions and Diseases of Public Health Significance (Non-communicable)

Report pediatric venous blood lead \geq 10 μ g/dL in children \leq six (6) years of age within one week.

Immediately report outbreaks of any of the following upon suspicion:

- Any disease required to be reported under this section
- Newborns with diarrhea in hospitals or other institutions
- Foodborne or waterborne diseases in addition to those specified by name in this rule
- Streptococcal illnesses
- Conjunctivitis
- Impetigo
- Nosocomial disease within hospitals and health care facilities
- Influenza-like-illness
- Viral meningitis
- Unusual occurrence of disease
- Any disease (e.g. anthrax, plague, tularemia, *Brucella* species, smallpox, or botulism) or chemical illness that is considered a bioterrorism threat, importation, or laboratory release.